

APPENDIX 1:

EPIDEMIOLOGIC PROFILE

APPENDIX 2:

PREVENTION FOR POSITIVES INTERVENTION FACT SHEETS

The pages that follow contain fact sheets and other information describing the HIV prevention interventions considered by the CPG for use in Vermont among people living with HIV/AIDS. The following interventions are included:

1. Tarzana HIV Service, Los Angeles
2. Brief Motivational Interviewing
3. HIV Prevention Education and Risk Reduction (Wisconsin)
4. HIV Stops with Me
5. Teens Linked to Care
6. Holistic Harm Reduction Program
7. Los Angeles Clinic-Affiliated Intervention
8. Stop AIDS Project, San Francisco
9. Positive Images, Los Angeles
10. Prevention in Medical Care Settings
11. Healthy Relationships
12. Power Program Los Angeles
13. HTPP HIV Transmission Prevention Project
14. Peer Based Intervention to Promote Condom and Contraceptive Use Among HIV Positive and At-Risk Women
15. Project Connect

APPENDIX 3: MSM NEEDS ASSESSMENT SURVEY AND INTERVIEW GUIDE

Appendix 3A: MSM Survey Instrument

Appendix 3B: MSM Service Provider Interview Guide

SURVEY FOR MEN WHO HAVE SEX WITH MEN (MSM)

Did you know that the Vermont Department of Health allocates more than \$175,000 for HIV prevention for men who have sex with men? The Vermont HIV Prevention Community Planning Group, a community-based advisory group to the Vermont Department of Health, would like to make sure that the Department funds programming of interest to you, and that organizations serving MSM in Vermont know what your priorities are. To that end, would you be so kind as to complete this survey? **Thank you for your time.**

You are making a difference.

| | |
|--|---|
| <p>1. What are the <u>primary</u> ways you spend your free time? →Check no more than five activities.</p> <p> <input type="checkbox"/> Large social events (parties, dances, etc.) <input type="checkbox"/> Small social events (dinners, get-togethers, etc.) <input type="checkbox"/> Arts and cultural events (theater, music, galleries, etc.) <input type="checkbox"/> Going to a bar <input type="checkbox"/> Going out elsewhere (restaurant, café, movies, etc.) <input type="checkbox"/> Dating/Looking for a partner <input type="checkbox"/> Connecting/Cruising for Sex <input type="checkbox"/> Internet (surfing, chat rooms, etc.) <input type="checkbox"/> Telephone chat lines <input type="checkbox"/> Adult education (classes, workshops, etc.) <input type="checkbox"/> Political work/Activism <input type="checkbox"/> Volunteer work <input type="checkbox"/> Sports/Exercise <input type="checkbox"/> Outdoor activities <input type="checkbox"/> Shopping <input type="checkbox"/> Hobbies (book clubs, gardening, etc.) <input type="checkbox"/> Individual and/or Couples Counseling <input type="checkbox"/> Support groups (including 12-step groups, coming out groups, etc.) <input type="checkbox"/> Religious activities/Spiritual gatherings (church, synagogue, Radical Faeries, etc.) <input type="checkbox"/> Parenting/Mentoring (spending time with your own or other children) Other: _____ </p> | <p>2. Which of the following do you NOT participate in but would <u>most</u> like to if it was available? →Check no more than five activities.</p> <p> <input type="checkbox"/> Large social events (parties, dances, etc.) <input type="checkbox"/> Small social events (dinners, get-togethers, etc.) <input type="checkbox"/> Arts and cultural events (theater, music, galleries, etc.) <input type="checkbox"/> Going to a bar <input type="checkbox"/> Going out elsewhere (restaurant, café, movies, etc.) <input type="checkbox"/> Dating/Looking for a partner <input type="checkbox"/> Connecting/Cruising for Sex <input type="checkbox"/> Internet (surfing, chat rooms, etc.) <input type="checkbox"/> Telephone chat lines <input type="checkbox"/> Adult education (classes, workshops, etc.) <input type="checkbox"/> Political work/Activism <input type="checkbox"/> Volunteer work <input type="checkbox"/> Sports/Exercise <input type="checkbox"/> Outdoor activities <input type="checkbox"/> Shopping <input type="checkbox"/> Hobbies (book clubs, gardening, etc.) <input type="checkbox"/> Individual and/or Couples Counseling <input type="checkbox"/> Support groups (including 12-step groups, coming out groups, etc.) <input type="checkbox"/> Religious activities/Spiritual gatherings (church, synagogue, Radical Faeries, etc.) <input type="checkbox"/> Parenting/Mentoring (spending time with your own or other children) Other: _____ </p> |
| <p>3. What health topics are of <u>greatest</u> interest to you? →Check no more than five topics.</p> <p> <input type="checkbox"/> Alternative therapies (acupuncture, aromatherapy, etc.) <input type="checkbox"/> Alzheimer's <input type="checkbox"/> Cancer <input type="checkbox"/> Diabetes <input type="checkbox"/> Diet/Nutrition <input type="checkbox"/> Heart disease <input type="checkbox"/> Hepatitis <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Other Sexually Transmitted Diseases <input type="checkbox"/> How to find a "GLBT-friendly" provider <input type="checkbox"/> Mental health <input type="checkbox"/> Physical fitness <input type="checkbox"/> Prostate health <input type="checkbox"/> Substance use/abuse and/or addiction <input type="checkbox"/> Other addictions (sex/love addiction, work addiction, etc.) <input type="checkbox"/> Tobacco cessation <input type="checkbox"/> Other: _____ </p> | <p>4. How did you hear about this survey? →Check all that apply.</p> <p> <input type="checkbox"/> Word of mouth <input type="checkbox"/> Internet <input type="checkbox"/> Email <input type="checkbox"/> Advertisement <input type="checkbox"/> Out in the Mountains <input type="checkbox"/> Case worker <input type="checkbox"/> Community organization/agency: _____ <input type="checkbox"/> Other: _____ </p> <p align="right">PLEASE CONTINUE ON THE OTHER SIDE →</p> |

APPENDIX 3A: MSM SURVEY – pg. 2 of 2

Demographic Information (optional)

1. Would you describe yourself as (check all that apply):

- ☐ Gay
☐ Bisexual
☐ Transgender
☐ Heterosexual
☐ Queer
☐ Other: _____

2. Age _____

3. Highest grade completed in school:

- ☐ 8th grade or less
☐ Some high school
☐ High school graduate or GED
☐ Some college, Associate's degree/
Technical school training
☐ College graduate / Postgraduate

4. What zip code do you live in? _____

5. What is your HIV status?

- ☐ HIV+ (HIV Positive)
☐ HIV- (HIV Negative)
☐ Don't know

6. What is your household's annual income before taxes?

- ☐ <\$12,000
☐ \$12,000 – \$24,000
☐ \$24,000 – \$36,000
☐ \$36,000 – \$48,000
☐ \$Over 48,000

Number of people in household: _____

7. Which racial group or groups do you consider yourself to be in? (check all that apply):

- ☐ American Native or Alaskan Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander
☐ White/Caucasian

8. Which ethnicity do you consider yourself to be?

- ☐ Hispanic or Latino
☐ Not Hispanic or Latino

Thank you for completing this survey!
We promise to use this information to serve you better.

Instructions: Please fold then tape closed. Return by mail by June 30, 2003.

A self-mailer imprint filled this space

APPENDIX 3B: MSM SERVICE PROVIDER INTERVIEW INSTRUMENT – pg. 1 of 5

Methods note: This instrument was used for phone interviews and responses were entered electronically; it was not intended as a self-administered written survey

I. PROVIDER PROFILE

| | |
|--|--|
| I.1. Organization | |
| I.2. Provider's Position | |
| I.3. To whom are your services available (generally)? | |
| I.4. Geographic service area | |
| I.5. Types of Services Offered to MSM | A. Crisis Services |
| | B. Cultural/Racial/Ethnic-specific |
| | C. Education |
| | D. Employment/Job-Related |
| | E. Faith-based |
| | F. HIV/AIDS |
| | G. Health |
| | H. Other social/human services: |
| | I. Political/Community Organizing/Advocacy |
| | J. Social/Recreational |
| K. Substance Use/Abuse | |
| L. Other: | |
| I.6. What are the ways you come into contact with MSM? <i>Describe your involvement/work with MSM; General description of services; not specific programming notes.</i> | |
| I.7. Is it part of your organization's mission or goals to address HIV/AIDS? | |
| YES: How is it addressed? | |
| NO: How, if at all, does it come up in your work? | |
| I.8. What challenges or issues do you face in providing services to MSM? How can these issues be addressed? | |

APPENDIX 3B: MSM PROVIDER INTERVIEW INSTRUMENT – pg. 2 of 5

I.9. What resources would help you better serve MSM?

| | Resources | How would the resource be used? |
|--|--------------------------|---------------------------------|
| | A. Staff/Human Resources | |
| | B. Training/T.A. | |
| | C. Funding | |
| | D. Print Materials | |
| | E. Other Materials | |
| | F. Other (specify): | |

I.10. Access of Services. I'm going to give you a list of ways in which MSM might access any of your services. I'd like to know if they access services in this way Never, Rarely, Sometimes, or Frequently.

| | |
|--|----------------------------|
| N - never R – rarely S – sometimes F - frequently | |
| | A. Phone |
| | B. By appointment |
| | C. Community/Public Events |
| | D. Referral/Word of Mouth |
| | E. Outreach |
| | F. Website |
| | G. Other (specify): |

II. DESCRIPTION OF MSM

II.1. To the extent that you can comment on this: In general terms, how would you describe the MSM you work with/serve?

First in terms of:

| | |
|---|--|
| II.1a. Self-identity <i>gay, bisexual, trans, hetero, etc.</i> | |
| II.1b. Sociodemographic characteristics <i>age, race, ethnicity, SES, HIV status, etc.</i> | |

APPENDIX 3B: MSM PROVIDER INTERVIEW INSTRUMENT – pg. 3 of 5

| | |
|--|--|
| II.1c. Risk behaviors <i>Engaging in sexual or needle-related HIV risk, or other risk behaviors</i> | |
| II.1d. Other characteristics | |

II.2. I'm going to give a list of categories, and would like to know if you work with (come into contact with) MSM who are in those categories.

- 0 – Not at all
- 1 – A little
- 2 – Some
- 3 – A lot
- 4 – Exclusively
- ? – Don't Know

| | |
|--|---|
| | A. Youth (13-24) |
| | B. Older (55+) |
| | C. HIV+ |
| | D. Men in serodiscordant relationships |
| | E. Men of color (Specify, if applicable) |
| | F. Men who are substance users and/or abusers |
| | G. Injection Drug Users (current or recent) |
| | H. Non-gay- or bisexual-identified |
| | I. Living at or below the poverty line |
| | J. Homeless/Seeking temporary shelter |
| | L. Incarcerated/involved with Corrections, Probation/Parole |
| | M. Dealing with mental illness/mental health issues |
| | N. Dealing with or who have a history of violence or abuse (perpetrators or survivors) |
| | O. Dealing with any other specific challenges (developmentally delayed, hard of hearing, visually impaired) |
| | P. Other groups: |

COMMENTS ON ANY OF THE ABOVE:

APPENDIX 3B: MSM PROVIDER INTERVIEW INSTRUMENT – pg. 4 of 5

| | |
|--|--|
| II.3. What would you say are the major health-related issues or concerns among the MSM you serve? <i>(Including conditions and access: HIV, HCV, other STIs or conditions, mental health, addiction, substance use, access to providers, cultural competency, prostate health, cancer, heart disease, diabetes, Alzheimer's, obesity)</i> | |
| II.4. What are the major other concerns, or priorities in their lives? <i>Social, political, financial, employment, etc.</i> | |

III. SERVICES

| | |
|---|--|
| III.1. What are the three best venues for reaching MSM with services/messages? <i>(Internet, bars, PSEs, community events, media, etc.</i> | |
| III.2. How might HIV counseling and testing be increased among the population you serve? How might the barriers to testing be removed? <i>(What are the barriers to HIV testing among the MSM you serve? How might those barriers be addressed?</i> | |
| III.3. Are you aware of any issues facing MSM living with HIV with regard to medical care and services? Are they receiving the care they need? Why or why not? <i>Barriers: cultural competency, distrust, transportation, denial, financial, etc.</i> | |
| III.4. What services or community functions do the MSM you serve want, but aren't receiving? What are the unmet needs? <i>(Social, medical, human services, housing, food, advocacy, etc.)</i> | |
| III.5. Would you say there are specific groups of MSM who <u>are</u> being well reached with HIV prevention services? If so, who? | |

APPENDIX 3B: MSM PROVIDER INTERVIEW INSTRUMENT – pg. 5 of 5

| | |
|--|--|
| III.6. Who is NOT being well reached? | |
| III.7. Are there specific (geographic) areas where services are most lacking, or more difficult to provide to MSM? If so, specify. | |
| In your service area: | |
| In Vermont in general: | |

III.8. I'm going to ask you about a range of HIV prevention services, and several questions about each one:

- Do you provide these services?
- Do you make referrals for these services?
 - If so, to what organizations?

| Service | Provide? (Y/N) | Refer? (to...) |
|-----------------|-------------------|----------------|
| ILI | | |
| GLI | | |
| CLI | | |
| CTS | | |
| Outreach | | VENUE(S): |
| PCM | | |
| Info/Hotline | | |
| PI | | |
| NEP | | |
| Online/Internet | | |
| Other | | |

| |
|---|
| III.9. Based on everything we've discussed, what do you think should be the priorities for implementing effective HIV prevention for MSM in your area? (<i>How could HIV prevention be more effective targeting MSM in Vermont</i>) |
| |

APPENDIX 4: IDU NEEDS ASSESSMENT

Appendix 4A: Materials and Methods

Appendix 4B: IDU Participant Interview Guide

Appendix 4C: IDU Service Provider Interview Guide

IDU Needs Assessment Project
Participant and Provider Interviews – Materials and Methods

Material

Two interview guides were used to collect data: one for IDU and one for service providers. These guides are included in Appendix 4.

Methods

1) Study design

The method selected to perform the IDU needs assessment was a qualitative method based on face-to-face interviews, or when this was not possible, phone interviews. This method was preferred over a quantitative method because of the limited data available on IDU, but also because of limited resources. All participants were reassured that the information gathered would be confidential. Verbal consent to participate was obtained from each respondent before starting the interviews.

2) Study population

Sample size, sample source, and venues

Key informants were identified among injection drug users and among IDU service providers. As a result of a collaborative effort with the health department, the CPG and the target populations, the following groups were identified at the outset of the project.

A minimum of 10 injection drug users

Key IDU informants were recruited, following the goals described below:

Age groups: 5 IDUs between 24 and 18 of age and 5 IDUs 25 and older.

Information on younger IDU (17 and less) was to be gathered from older participants and from provider interviews.

Appendix 4A: IDU Needs Assessment: Materials and Methods – pg. 2 of 3

Venues for data collection:

- 2 IDUs in Drug treatment facilities, 1 inpatient and 1 outpatient treatment facility
- 3 IDUs through syringe exchange programs/prevention case management interventions, harm reduction center
- 2 IDUs who are incarcerated
- 3 IDUs reached through outreach in street locations or other community location
- 1 IDU through an out-of-state methadone clinic

Gender: The target figures for gender were 70% male and 30% female IDUs.

Race/ethnicity: 70 to 80% Caucasian/white and 20 to 30% minorities. Priority was given to IDUs who are Latinos/Latina and African American.

Counties of interest: Sampling took place in four counties: Chittenden (Burlington), Caledonia (St. Johnsbury), Windham (Brattleboro) and Rutland (Rutland).

HIV status: Preferably, at least 30% participants would be HIV positive.

A minimum of 10 IDU service providers distributed as follows:

Key informants were recruited as per the following goals:

- 5 HIV Prevention (includes harm reduction programs) and care services providers for IDUs: 2 in Burlington, 1 in Windham, 1 in Caledonia county and 1 in Rutland
- 1 Health Department/ADAP staff
- 2 substance abuse treatment facility - identify with ADAP and 1 key informants among mental health providers that have an HIV prevention program

Appendix 4A: IDU Needs Assessment: Materials and Methods – pg. 3 of 3

3) Data collection

Service providers were interviewed by the CPG consultant, using the designated interview guide. Prior to data collection, the key providers were identified with help from the IDU Needs Assessment Committee, Alcohol and Drug Abuse Program (ADAP) and based on the HIV resource guide. Key informants were chosen based on their experience with IDU and their capacity to provide extensive information on IDUs and their need for services.

Injection drug users would preferably be interviewed by the service provider they are accustomed to. Service providers were to use the designated interview guide.

Injection drug users were identified by the service provider based on the named criteria (see below).

The interviewer read the consent form to each participant (see Interview Guide in Appendix 4). Upon verbal consent, the participant would be screened for eligibility. The participant would be interviewed only if s/he was eligible.

Injection drug users who completed the interview received a gift certificate for the amount of \$25 to encourage participation.

4) Recruiting and screening injection drug users

Respondents were required to:

- Have injected drugs within the past 12 months
- Be a Vermont resident for at least 6 months
- Be at least 18 years old
- Be willing to participate
- Be fully coherent at the time of interview

Participant Interview Guide

Interview number _____

Date: _____ County of interview: _____

Place of Interview: _____

Section 1: Participant Information

1-1) What county do you live in? _____

1-2) What is your age? _____

1-3) Do you identify as: _____ Male _____ Female _____ Transgender

1-4) Would you say that you are (*read the options*): _____ Hispanic or _____ Non-Hispanic

1-5) I'm going to read a list of race options. Let me know if any apply to you. You can answer yes more than once: *Check all that apply.*

- _____ American Indian or Alaska Native
- _____ Asian
- _____ Black or African American
- _____ Native Hawaiian or Other Pacific Islander
- _____ White or Caucasian
- _____ Any other race that I haven't mentioned? _____

1-6) Have you ever been tested for HIV?

_____ Yes _____ No (if no, skip to 1-7)

_____ Don't know/Don't remember (skip to 1-7) _____ Declined to answer (skip to 1-7)

1-6A) IF YES: What kind of test was your last HIV test?

_____ Blood test _____ Oral test (Orasure)

_____ Other: _____ Don't know/Don't remember

Appendix 4B: IDU Participant Interview Guide - pg. 2 of 10

1-6B) IF YES: What was the result of your last HIV test?

_____HIV Positive _____HIV Negative

_____Don't know/don't remember _____Declined to answer

1-7) Have you ever been tested for Hepatitis C (HCV)?

_____Yes _____No

_____Don't know/Don't remember _____Declined to answer

1-7A) IF YES: What was the result of your last HCV test?

_____Hep C Positive _____Hep C Negative

_____Don't know/Don't remember _____Declined to answer

1-7B) IF HCV POSITIVE: Have you ever been in treatment for Hepatitis C?

_____Yes _____No

_____Don't know/Don't remember _____Declined to answer

1-8) Have you been immunized for Hepatitis A?

_____Yes _____No

_____Don't know/Don't remember _____Declined to answer

1-9) Have you been immunized for Hepatitis B?

_____Yes _____No

_____Don't know/Don't remember _____Declined to answer

Section 2: HIV Prevention Services

I'm going to ask you about your experience with AIDS and HIV, which is the virus that causes AIDS.

Question 1- What do you know about AIDS and HIV, the virus that causes AIDS?

Question 2- Where did you learn about it? *Get as much info as possible about the different types of interventions/program (see question 3, below)*

Question 3- Can you help me classify the programs that you have been to? I am going to read a list of different kinds of services, where there may be a discussion about HIV or AIDS. Let me know if you have experienced any of these services. *(Find out where services were received -- provider, location.)*

- Have you been to a counseling and testing session? *When they talk about HIV and draw blood or swab your mouth for testing.*
- Has someone ever come up to you in the street, a shooting gallery, at home, etc. to talk about HIV or AIDS? *Street outreach, institutional outreach, etc.*
- Have you ever called an 800 number to get information about HIV or AIDS? *Information/Hotline*
- Has anyone talked to you one-on-one about HIV or AIDS, and taught you how to clean injection equipment, use a condom, negotiate safer sex with your partner, etc.? *Individual Level Intervention*

Appendix 4B: IDU Participant Interview Guide - pg. 4 of 10

- Has anyone talked to you in a group, with other users, to teach you about how to clean injection equipment, use a condom, negotiate safer sex with your partner, etc.? *Group Level Intervention*
- Have you ever participated in any larger events with a social component, where you get together, have fun and talk about issues for users? *Community Level Intervention*
- Have you ever seen a message about HIV or AIDS in a brochure, poster or a billboard, or have you seen a public presentation, or a TV commercial or broadcast about HIV or AIDS? *Public Information (print, broadcast, etc.)*
- Have you been to a needle exchange program, where they give you new needles/syringes in exchange for used needles/syringes?
- Have you ever received prevention case management services where someone worked with you on an ongoing basis to provide support, help dealing with systems (court, jail, probations), help you get services (drug treatment, healthcare, housing, jobs) and help you reduce the risk of HIV/Hep C transmission (help getting sterile syringes, condoms, safer sex and safer injection information)? Some places may use other terms for PCM, like “harm reduction coordination.”
- Have you ever been in a substance abuse treatment program, including medication assisted treatment, such as methadone and buprenorphine? *May be more than one occasion; residential; outpatient; compulsory or voluntary; medication assisted treatment; abstinence-based program.*
- Is there any other program you’ve participated in, where HIV or AIDS was mentioned? If so, describe:

Appendix 4B: IDU Participant Interview Guide – pg. 5 of 10

Question 4- Based on everything we just talked about -- What do you think about the services you received in general? What was good, what was not good? How did you connect to the services? How did you get there and/or why did you participate? (*Quality of services, staff, location, time, etc.; referral, friend, mandated participation, etc.*)

Question 5- ? If you had the opportunity to change something, what would you have changed about the services or programs you participated in? For what reasons? Would you be more likely to use the services if those changes were made? Why? What are some reasons why you wouldn't use these kinds of services?

Question 6- What are you doing now to protect yourself from HIV infection?

Question 7- How did the program(s) we've talked about change what you were doing or not doing to protect yourself or your partners from HIV, the virus that causes AIDS?

Question 8- How did that happen? What convinced you to change? Which program contributed the most to that change? Why?

Question 9- Are there ways you would have liked to have learned about HIV/AIDS that we haven't discussed? Are there services you would like to receive but haven't? If so, what should those services look like (who, what, where, how delivered)?

Section 3: Counseling and testing / treatment and care

I'd like to ask you some more about HIV testing.

Work through this section quickly; go for succinct answers versus a longer discussion.

I remember you saying that you have never been tested:

Question 13- What might lead you to get tested? Is there anything that has kept you from getting tested?

Question 14- Where would you go if you wanted to be tested? Why? What kind of test would you use if you had the choice? Why? *Give choice if necessary (oral, blood test)*

I remember you saying that you have been tested:

Question 15- Where did you get tested? How did you connect with the service (*word of mouth, referral, etc.*)? What do you think about the session?

Question 16- Tell me about the counseling you received (if any). Was it helpful? Why or why not? What was that experience like (positive and negative)?

Question 17- Where would you go if you wanted to be tested again? Why?

If participant has tested positive: I remember you saying that you were positive, I'd like to ask about your experience with treatment services after you got tested.

Question 18- Did you receive medical treatment and/or health care services after you got your HIV test results? Why or why not? If so, what has that experience been like (positive and negative)?

Question 19- How long did it take you to receive care? Did you receive care services quickly/right away? Why or why not? If not, what might help you access those services now?

Section 4: Effective/Culturally Competent HIV prevention interventions

Now I would like to have a sense of what would work for people who inject if I wanted to talk to them about HIV or AIDS. This section is very important because it will help the Vermont Department of Health know how to spend federal dollars to prevent people who inject drugs from getting HIV or Hepatitis C.

Question 20- Based on your experience or just your opinion, what should be the TOP priorities to help people who inject do it safely, avoid sharing injection equipment, get connected to treatment, or encourage them to use condoms and barriers? Are there services people who inject would like to receive but haven't? If so, what should those services look like (what, who, where, how delivered)?

(What should HIV prevention for users look like, and what should the top priorities be? It may be helpful to refer back to the list in Question 3 again.)

Question 21- Where do you think people who inject would prefer to hear about HIV or AIDS? In what setting? Under what circumstances? *Would they rather talk about it in a drug treatment facility, methadone clinic, needle exchange, at the hospital, in an office, etc.?*

Question 22- How do people want to hear about it: in a one-on-one discussion, a discussion in a group with other users, a discussion on the phone, or just be handed material (condom, bleach kits, other)?

Question 23- What would be a good time to talk to people who inject about HIV/AIDS? Why is that? What are the worst times to address HIV and AIDS with users?

Question 24- What kind of person would users prefer to hear about HIV or AIDS from? Why? Who would users not like to hear about HIV or AIDS from? Why? *(Be sure to ask for both positive and negative examples.)*

Appendix 4B: IDU Participant Interview Guide - pg. 8 of 10

Question 25- What do you think might keep people away from these kinds of HIV prevention services? What turns them off? What makes it hard for people to address HIV and AIDS with users? What are biggest barriers or obstacles?

(What are the challenges for: recruiting users to participate in programs; speaking with IDUs; encouraging people to limit or stop sharing injection equipment; to stop using; to use condoms and barriers; to get tested.)

Question 26- Do you think there are certain people, or kinds of people, who aren't being reached with HIV prevention programs, HIV testing, and/or HIV/AIDS care? ? Who? *(youth, women, people of color, people living with HIV, MSM, etc.)*

Question 27- Outside of the HIV prevention services we've talked about, what other kinds of services do you think users MOST need in this area? *(methadone; access to health care; social services, e.g., housing, financial assistance, mental health services; etc.)*

Question 28- What do you think are the main health concerns of users in this area? Why do you think so? How should those concerns be addressed?
(HIV, HCV, other conditions, addiction, access to providers, cultural competency, etc.)

Section 5: Injection Drug Use in Your Area

For this section, the questions get more specific to what you think is going on in this area. I don't want you to name names or give any information you are uncomfortable giving. Remember that this is an anonymous survey and that it's okay to pass on any question. Also remember that the information that you give me will be kept confidential, and that only the research team will have access to it.

Drug use

Question 29- What kinds of places around here do people use to shoot up? And why do you think those are the places they choose to do it? *(NOT looking for specific places, just general answers: homes; shooting galleries; public restrooms; on the street; parks; in cars; etc.)*

Appendix 4B: IDU Participant Interview Guide - pg. 9 of 10

Question 30- What are the ways people get their drugs? *(Don't need to name sources; looking for general answers: from friends; from a dealer; in shooting galleries; on the street; etc.)*

Question 31- What kind of drugs are used? How are the drugs injected? *(injection equipment used; other paraphernalia used; how injected (intravenous; subcutaneously; intramuscular); parts of body or areas of skin where injected; overall injection practices)*

How about yourself? Could you describe the way you usually inject?
(injection equipment used; other paraphernalia used; how injected (intravenous; subcutaneously; intramuscular); parts of body or areas of skin where injected; overall injection practices)

Risk behavior: needle sharing

Question 32- Where do users around here get needles? syringes? other injection equipment?

Question 33- Do you think there is a lot of sharing of injection equipment going on around here? If so, what gives you that impression? Are there places where it's more common for people to share injection equipment? If so, what are they? What are the most common reasons for people to share injection equipment? *(don't feel at risk; sharing only with one partner; can't get injection equipment; pressure to do so)*

Risk Behavior: Condom use

I'd also like to ask you a few questions about condoms.

Question 34- Where do people get condoms around here?

Question 35- Do you think there is a lot of unprotected sex going on around here? If so, what gives you that impression? What do you think are the most common reasons for people to have unprotected sex? *(don't feel at risk; sex only with one partner; can't get condoms; drug-related impaired judgment; trading sex for resources; pressure to have sex; assault/coercion)*

Appendix 4B: IDU Participant Interview Guide – pg. 10 of 10

Attitude towards HIV/AIDS

Question 36- Lastly, I'd like to know how you think users feel about HIV and AIDS. Do they think about it a lot? Do users know about the ways in which HIV is spread and prevented? Are people concerned about HIV/AIDS? Why or why not? *(What are IDU's feelings around HIV? Do they feel at risk? Is it on peoples' minds? What are the misconceptions about HIV, transmission, etc.?)*

Question 37- That's everything I have. Is there anything else you'd like to add? Anything you think is important that we haven't talked about?

Thank you for participating in this survey.

Give gift certificate to participant.

Service Provider Interview Guide

Interview number _____

Date: _____ Interviewer: _____

Place of interview: _____ County of interview: _____

Section 1: Provider's profile

Age: _____ years **Gender:** ___ Male ___ Female ___ Transgender

Ethnicity: ___ Hispanic ___ Non-Hispanic

Race: *Check all that applies*

___ American Indian or Alaska Native ___ Asian ___ Black or African American
___ Native Hawaiian or Other Pacific Islander ___ White ___ Other

Organization: _____ **Provider's Position:** _____

Type of services provided by your organization:

Describe your involvement/work with injection drug users:

Section 2: Description of injection drug users

Question 1: How would you describe the injection drug users that you serve, based on sociodemographic characteristics and behavioral characteristics?

Prompt: Sociodemographics: age, race, ethnicity, gender. Behavioral characteristics can be sharing needles, unprotected vaginal, anal or oral sex; multiple sex partners, settings and circumstances in which they inject drugs etc.

Question 2: What would you say are the major health related issues among the IDU population you serve? *HIV, HCV, other conditions, addiction, access to providers, cultural competency, etc.*

Question 3: What would you say is the impact of HIV among the IDU population you serve? Are you aware of any/a few/many IDUs living with HIV? *Quantify, if possible – numbers of clients; approximate percentage of population; etc.*

Question 4: Are you aware of any issues facing IDUs living with HIV with regard to medical care and services? Is this population receiving the care they need? Why or why not? *Barriers to care; cultural competency; distrust; etc. Alternately – successful strategies for linking people to care and services.*

Section 3: Services

Question 5: What challenges or issues do you face in providing services to injection drug users? How can these issues be addressed? *What are the barriers to providing services? What keeps people from accessing your services? Is there a gap between your area of expertise and the needs of injection drug users in your area? Are there any cultural competency issues?*

Question 6: Can you identify the most critical service gaps facing injection drug users in your area? What services are needed by injection drug users, and are not provided, or are insufficient? Among the service gaps identified, which ones are the two most urgent to address. Why are they most important?

Question 7: Are there any unique needs within special populations among your target audience? If so, what are they? (*women, youth, incarcerated, homeless, etc.*)

Question 8: I'm going to ask you about a range of HIV prevention services, which you may or may not provide yourself. I'd like to know your impressions of these kinds of services – are they or would they be an effective HIV prevention strategy for this population? If so, what environments or other guiding principles would be important for success? Are IDUs in your area accessing any of these services? Why or why not (to all of the above)? *Include any general comments about service(s).*

Counseling and Testing services

Prevention Case Management

Outreach (street outreach, institutional outreach, etc.)

Information/Hotline

Individual Level Intervention (one-on-one counseling in any environment)

Group Level Intervention (guided group activity/discussion)

Community Level Intervention (larger events with a social component)

Public Information (print, broadcast, etc.)

Needle exchange

Substance Abuse Treatment

Other?

Question 9: What is your impression of harm reduction-based HIV prevention strategies for injection drug users in your area? Are they being implemented? utilized? *What do you think is the role of harm reduction in HIV prevention for injection drug users? How would you define harm reduction? What are the behavior change differences/advantages of a harm reduction (vs. abstinence-based) approach?*

Question 10: What kinds of services are effective in changing risk behavior (or supporting continued/increased risk reduction) (needle sharing, drug injection practices)?

Refer to the list of key services to guide the respondent, which describes each of the following:

Health Care and Medical Services

- Health care services

- Medication services

Mental and social support services

- Counseling/mental health services

- Case management services

HIV prevention services

- HIV prevention case management

- HIV education interventions (see above)

- Needle exchange

- Counseling and Testing

Substance abuse services

- Methadone

- Other medical detoxification services

- Other substance abuse treatment (residential, outpatient)

Question 11: What policy changes can improve HIV prevention among injection drug users? Why would these policies improve HIV prevention? *Governmental (federal, state, local); Department of Health, Corrections, Education, Mental Health, etc.; within other agencies/providers.*

Question 12: Is there anything else about HIV prevention and services for this population that I haven't asked you about, which you feel is important? Anything you'd like to add?

Question 13: Based on everything we've discussed, what do you think should be the priorities for implementing effective HIV prevention for injection drug users in your area?

Additional comments:

Section 4: Injection Drug Use

Question 14: What kinds of places do people around here shoot up? And why do you think those are the places they choose to do it? (*homes; shooting galleries; public restrooms; on the street; parks; in cars; etc.*)

Question 15: Where do people get their drugs? (*don't need to name sources: looking for answers such as: from friends; from a dealer; shooting galleries; on the street; etc.*)

Question 16: What kinds of drugs are used? How are the drugs injected? (*material and parts of body*)

Question 17: Where do people get needles in this area?

Question 18: Do you think there is a lot of needle and/or paraphernalia sharing going on around here?

_____Yes _____No

18A) What gives you the impression that there is/is not? *What is the basis for your answer?*

18B) Are there places where it's more common for people to share needles? What are they?

Question 19: What do you think are the most common reasons for people to share needles? (*don't feel at risk; sharing only with one partner; can't get needles; pressure to do so*)

Question 20: Are you aware of injection drug users in your area engaging in other related HIV risk behaviors? *Sharing straws for snorting; trading sex for resources; unprotected sex; multiple sex partners; etc.*

Additional comments: